

ISSUE SLIP STAPLE AREA (for additional cross references)

*79
3-1-01*

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>SS</i> | <i>JCSM</i> | <i>02-28-01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

*118
16*

| Claim | Date |
|----------|----------------|
| Final | |
| Original | |
| 1 ✓ | <i>6/11/02</i> |
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| Claim | Date |
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| Final | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)